



THE CITY OF SAN DIEGO

## Purchasing Division Vendor Application

*Instructions: Complete entire application and send by mail to City of San Diego Purchasing Division, 1200 Third Avenue, Suite 200, San Diego, CA, 92101-4195 or send by fax to (619) 236-5904.*

Business Information		
Business Name:		
Doing Business As:		
Address:		
City:	State:	Zip: -
Contact Person(s):		
Soc Sec/Tax ID No.:	Phone: ( ) x	Fax: ( )
E-mail:		
If Company is not in California, are you authorized to collect CA Sales Tax? Yes Permit no. _____ No		Are you certified as a small/ethnically and culturally diverse/woman/disadvantaged/disabled veteran/other business? Yes Certifying Agency _____ No
Accounts Receivable Information (If different from above) (Where would you want Purchase Order payment remittances sent?)		
Business Name:		
Address:		
City:	State:	Zip: -
Accounts Receivable Contact:		
Phone: ( ) x	Fax: ( )	
E-mail:		
Commodities or Services Provided (Attach Line Card if available or provide description below)		

Visit our web pages at [www.sandiego.gov](http://www.sandiego.gov) under the Business section.

City of San Diego Purchasing Division, 1200 Third Avenue, Suite 200, San Diego, CA 92101-4195 (619) 236-6000 Fax: (619) 236-5904